Trauma Clinical Guideline:

Full Trauma Team Activation Criteria

The Trauma Medical Directors' Workgroup is an open forum for the directors of designated trauma services in Washington State to share ideas and concerns regarding the provision of trauma care. The workgroup meets twice a year to encourage communication between services so that they may share information and improve the quality of care that they provide to patients. On occasion, at the request of the Governor's Steering Committee on EMS and Trauma Care, the group discusses the value of specific guidelines for trauma care procedures.

The Full Trauma Team Activation Criteria Guideline is distributed by the Washington State Department of Health on behalf of the Governor-Appointed Steering Committee on Emergency Medical Services and Trauma Care to assist trauma care services with the development of their trauma patient care guidelines. Toward this goal the Trauma Medical Directors have categorized the type of guideline, the sponsoring organization, how it was developed, and whether it has been tested or validated. It is hoped that this information will assist the physician in evaluating the content of this guideline and its potential benefits for their practice or any particular patient.

The Department of Health does not mandate the use of this guideline. The Department recognizes the varying resources of different services and that approaches that work for one trauma service may not be suitable for others. The decision to use this guideline depends on the independent medical judgment of the physician. It is recommended that trauma services and physicians who choose to use this guideline consult with the Department or American College of Surgeons Committee on Trauma on a regular basis for any updates to its content. The Department appreciates receiving any information regarding practitioners' experiences with this guideline. Please direct comments to Mary Rotert RN, 360 236-2874 or mary.rotert@doh.wa.gov

This is a trauma assessment and management guideline. It was adapted from the American College of Surgeons Committee on Trauma, and from other professional literature. The trauma medical directors group reviewed the guideline, sought input from trauma care physicians throughout Washington State, and used that input to make changes. The guideline was then endorsed by the Steering Committee, and by the DOH Office of EMS/TS. This guideline has not been tested or validated.

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Trauma Clinical Guideline:

Full Trauma Team Activation Criteria Guideline

Full Trauma Team Activation refers to automatic activation of the entire trauma team, including the general/trauma surgeon, based on predefined criteria.

Modified trauma team activation allows for initial activation of a portion of the trauma team (usually excluding the general surgeon) with subsequent activation of the full team if necessary.

Objective:

This guideline seeks to define the **MINIMUM** patient criteria for Full Trauma Team Activation. Additional criteria may need to be added based on local hospital resources.

Injured patients meeting **any one** of the criteria below are believed to benefit from activation of the Full Trauma Team, including a general surgeon:

- Confirmed SBP < 90 mmHg at any time in adults (established by a second measurement in rapid succession)
- Age-specific hypotension in children
- Transferred patient from other hospital receiving blood to maintain vital signs
- Gunshot wound(s) to the neck, chest, abdomen, or groin
- Anticipated arrival of > 3 seriously injured patients
- Unable to intubate in prehospital setting with suspected need for surgical airway